|   |  |  |               |                                    |                   |                  |                | Application or Docket Number |                    |          |      |                    |                        |
|---|--|--|---------------|------------------------------------|-------------------|------------------|----------------|------------------------------|--------------------|----------|------|--------------------|------------------------|
|   | PATENT   | APPLICATI<br>Effe                            | )             | 10/658659                          |                   |                  |                |                              |                    |          |      |                    |                        |
|   |  |  | SMALL<br>TYPE | ENTIT                              |                   | OR               | OTHER<br>SMALL |                              |                    |          |      |                    |                        |
| T   | OTAL CLAIM!  | 5  |               |                                    |                   |                  |                | RATE                         | F                  | EE       |      | RATE               | FEE                    |
| F   | OR   |  | NUMBER FILED  |                                    | NUMBER EXTRA      |                  | ŀ              | BASIC F                      | EE 385             | 5.00     | OR   | Basic Fee          | 770.00                 |
| T   | DTAL CHARGE  | ABLE CLAIMS                                  | minus 20=     |                                    | •                 |                  |                | XS 9:                        |                    |          | OR   | X\$1.8=            |                        |
| iN  | DEPENDENT (  | CLAIMS                                       | minus 3 =     |                                    | •                 |                  |                | X43=                         |                    |          | OR   | X86=               |                        |
| М   | ULTIPLE DEPE   | NDENT CLAIM                                  | PRESENT       |                                    |                   | · 🗖              |                |                              |                    | $\neg$   |      | +290=              | - · -                  |
| * If the difference in column 1 is less than zero, enter "0" in column 2,   |  |  |               |                                    |                   |                  | `              | +145:                        |                    |          | OR   |                    |                        |
|   |  |  |               |                                    |                   |                  |                | TOTA                         | ـــا ٦             |          | OR   | TOTAL              | نـــنا                 |
|   | CLAIMS AS AMENDED - PART II . 9 (Column 3) (Column 2) (Column 3) |  |               |                                    |                   |                  | 4              | SMAL                         | L ENTI             | TY (     | OR   | SMALL!             |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |               | HIGHI<br>NUME<br>PREVIO<br>PAID F  | BER               | PRESENT<br>EXTRA |                | RATE                         | ADI<br>TIOI<br>FE  | VAL      |      | RATE               | ADDI-<br>TIONAL<br>FEE |
| Ş   | Total  | 1-21   | Minus         | 1-2                                |                   | e                |                | X\$ 9=                       |                    |          | OR   | X\$18=             | ·                      |
| E E   | Independent  | 1. 4   | Minus         | 4                                  |                   | •                |                | X43=                         |                    |          | OR   | X86=               |                        |
|   | FIRST PRES   | ENTATION OF M                                | ULTIPLE DE    | PENDENT                            | CLAIM             |                  |                | +145=                        |                    |          | OR   | +290=              |                        |
|   |  |  |               |                                    |                   |                  | L              | TOTA                         |                    | $\dashv$ | OR , | TOTAL              |                        |
|   |  | (Column 1)                                   |               | (Colum                             | າດ 2)             | (Column 3)       |                | ØDIT. FE                     | E (                |          | •    | ADDIT. FEE!        |                        |
| AMENDMENT B   | 12804  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    | ·             | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ST<br>IER<br>USLY | PRESENT<br>EXTRA |                | RATE                         | AOC<br>TION<br>FE  | IAL      |      | RATE               | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 16   | Minus         | -2                                 | <u> </u>          | = /              |                | X\$ 9=                       |                    | <u> </u> | OR   | X\$18=             |                        |
|   | Independent  | NTATION OF M                                 | Minus         | ere I                              |                   |                  |                | X43=                         | 1.7                |          | DR   | X86=               |                        |
|   | rinsi Prese  | NIAHONOPM                                    | DETIPLE DE    | FUDERI                             | COAIM             | /· [_]           | ' [            | +145=                        | V                  |          | )R   | +290=              |                        |
| ) · · · · · · · · · · · · · · · · · · ·   |  |  |               |                                    |                   |                  |                | TOTAL<br>DDIT. FE            | 7                  |          | )R   | TOTAL<br>ODIT, FEE |                        |
|   | (Column 1) (Column 2) (Column 3)                                 |  |               |                                    |                   |                  |                |                              | 10-                |          |      |                    |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    | •             | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ST<br>ER<br>USLY  | PRESENT<br>EXTRA |                | RATE                         | ADD<br>TION<br>FEE | AL       |      | RATE               | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •  | Minus         | ••                                 |                   | = .              |                | X\$ 9=                       |                    | lo       | R    | X\$18=             |                        |
|   | Independent  | •  | Minus         | ette.                              |                   | <b>9</b>         |                | X43=                         | 1                  | ٦̈́      | , t  | X86=               |                        |
| "   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                   |  |               |                                    |                   |                  |                |                              | _                  | $\dashv$ | R    |                    |                        |
| +145= OR +290=  |  |  |               |                                    |                   |                  |                |                              |                    |          |      | اا                 |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  OR  ADDIT. FEE |  |  |               |                                    |                   |                  |                |                              |                    |          |      |                    |                        |
|   |  | mber Previously Pail<br>ther Previously Pail |               |                                    |                   |                  | r loun         | d in the a                   | ppropriate         | s bax th |      | mn 1.              | •                      |